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Edit Firm Emp Relationship End of Life Washington

Firm *		
NANCY L SAPIRO (17935)		
Employer or Subcontracting *		•
Directly for an employer		
Subcontracting through a firm		
Employer *	,	
End of Life Washington (16352)	•	•
Compensation		
Identify the compensation you receive for lobbying only and indicate how your receive no compensation for lobbying enter a zero (0) dollar amount. Monthly Expenditure Report Instructions	ou are paid (i.e., hourly, monthly	/, other). If you
What is your pay (compensation) for lobbying?	· · · · · · · · · · · · · · · · · · ·	
Compensation Amount * \$ 1500.00 Compensation Period * Per Month \$ Other		

Description of Employment *
☐Unsalaried officer or member of group
□Full time employee
□Lobbying is only part of other duties
□Part time or temporary employee
☑Sole duty is lobbying
□Contractor or retainer or similar agreement
Expenses and Reimbursement
Indicate how and to what degree you are paid for lobbying expenses other than your salary.
Do you have an ongoing reimbursement agreement from your client? * O No O Yes
Are you reimbursed for incidental lobbying expenses? *
│
○ Yes
Does employer pay any of your lobbying expenses directly? *
○ No
○ Yes
Lobbying Length and Exemptions

If you meet one or more of the exemptions described in RCW 42.17A.610, you can identify the months you are voluntarily registered but not required to file a monthly expense report. Select Yes for Are you exempt from filing monthly reports? and click each month for which you are exempt from reporting.

Em	ploy	men	t Per	boi								
Sele	ct the r	nonths	you wi	ll be reg	gistered	l to lol	oby for	this em	ployer.			
Sel	ect n	nont	hs y	ou w	ill lo	bby	for t	his e	empl	oyer	in 2016	and of subsection
□ Jan	⊖ Feb	□ Mar	□ Apr	□ May			⊋. Aug			⊡ Nov	তृः Dec	
Sel	ect n	nont	hs y	ou w	ill lo	bby	for t	this e	empl	oyer	in 2017	
ু Jan	② Feb	☑ Mar	⊙ Apr	⊘ May	② Jun	ত্র Jul		☑ Sep	☑ Oct	☑ Nov		
Sel	ect n	nont	hs y	ou w	ill lo	bby	for t	this e	empl	oyer	in 2018	
⊘ Jan	☑ Feb	☑ Mar	⊘ Apr	☑ May	☑ Jun	☑ Jul	⊘ Aug	☑ Sep	☑ Oct	☑ Nov	© Dec	
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e yo	u exe	mpt 1	from	filing	mor	ithly	repo	rts fo	or any	y of tl	he months your are empl	oye

Employer Areas of Interest

Identify all subject areas about which you anticipate lobbying the legislature or state agencies.

• • • • • • • • • • • • • • • • • • • •	
Employer Areas of Interest *	
□Agriculture	
☐Business and consumer affairs	
□Constitutions and elections	
□Education	
□Energy and utilities	
□Environmental Affairs - Natural resources - Parks	
□Financial institutions and insurance	
OFISCAL	
☑Health care	
☐ Higher education	
□Human services	
□Labor	
☑Law and justice	
□Local government	
☐State government	
□Technology	
□Transportation	
Other	
y typing "I CERTIFY" in the box below, I hereby certify that the above is a true, omplete and correct statement. *	ent grows
ubmit to PDC Cancel	
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Overview	unterfere Machiner
Signatures (client authorization)	
SANY PLETSE SIGN	

Change authorization see below

Exempt from filing

Please update contact into for End of life wa to: Saily Mc Laughlin smclaughlin a end of life wa.org

email contact